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ASSISTANT COMMISSIONER FOR PATENTS  
Washington, DC 20231

PATENT  
File No.: 0808.65559  
Date: May 22, 2001

Sir:

Transmitted herewith for filing pursuant to 35 U.S.C. §111(a), is the patent application of

Inventor(s): Nigel Peter Topham and Adrian Wise

For: PROCESSOR HAVING COMPRESSED . . .

I hereby certify that this paper is being deposited with the United States Postal Service as EXPRESS MAIL in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231, on May 22, 2001.

Express Label No.: EL 846164444 US

Signature: Daniel C. Burns

Enclosed are:

- (X) 45 pages of specification, including 37 claims and an abstract.  
(X) an executed oath or declaration, with power of attorney.  
( ) an unexecuted oath or declaration, with power of attorney.  
( )        sheet(s) of informal drawing(s).  
(X) 13 sheet(s) of formal drawings(s).  
(X) Assignment(s) of the invention to SIROYAN LIMITED and Assignment Recordation Form.  
(X) A check in the amount of \$ 40.00 to cover the fee for recording the assignment(s) is enclosed.  
(X) Information Disclosure Statement; Form PTO-1449 and cited references.  
(X) Claim for Priority and Priority Document  
( ) PCT Request (Courtesy copy)

JC971 U.S. PRO  
09/09/05 2654  
05/22/01

Fee Calculation For Claims As Filed

a) Basic Fee				\$ 710.00
b) Independent Claims	<u>4</u>	- 3	= <u>1</u>	x \$ 80.00 = \$ <u>80.00</u>
c) Total Claims	<u>37</u>	- 20	= <u>17</u>	x \$ 18.00 = \$ <u>126.00</u>
d) Fee for Multiple Claims				\$270.00 = \$ <u>            </u>
Total Filing Fee				\$ <u>916.00</u>

- (X) A check in the amount of \$ 916.00 to cover the filing fee is enclosed.  
(X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.

GREER, BURNS & CRAIN, LTD.

By:   
Patrick G. Burns  
Registration No. 29,367

300 South Wacker Drive  
Suite 2500  
Chicago, Illinois 60606  
(312) 360-0080  
Customer Number: 24978